

Dance Clinic

Saturday, December 5, 2015

9:30 a.m. - 2:00 p.m.

Cost \$30.00



The Sky Dancers would be honored to have your child attend our annual Dance Clinic where your child will receive hours of dance training, a Sky Dancer Dance Clinic t-shirt, and most importantly HAVE FUN! Classes will be grouped according to grades K-3, 4-6, 7-11.

WHAT IS INCLUDED?

Dance Clinic t-shirt
Dance training
Q&A session for potential Sky Dancer candidates
Showoff Performance at 2:00 p.m.

SCHEDULE:

9:30 – 10:00 a.m. Registration (Gym Foyer doors)
10:00 – 12:00 p.m. Instruction
12:00 – 12:30 p.m. Lunch
12:30 – 2:00 p.m. Instruction
2:00 p.m. Showoff Performance
(Visitors welcome...don't forget your camera!)

HOW TO REGISTER: (Do NOT turn in your registration form and payment to your child's school)

•PRE-REGISTRATION is due by **November 20th** & guarantees your shirt size. Registering isn't required, but is preferred. You can walk in & pay the day of the clinic, we just can't guarantee shirt size, but we'll do our best! ☺

Choose one of the following:

- Mail this form and payment, received by November 20th (TCHS – Attn: Rebecca Rose, 12350 Timberland Blvd, 76244)
- Return your registration form and payment to the main office at Timber Creek HS. TCHS students return to Ms. Rose (A112)
- Register the day of the clinic at no extra cost, however, t-shirt availability the day of the clinic may not be guaranteed

All participants should wear sneakers or dance shoes and clothing suitable for dancing; such as t-shirts, leotards, tights, etc. Participants will receive a clinic t-shirt that can be worn during the clinic, as well as the Showoff Performance.

****Each participant will need to bring a sack lunch (with their name written on it) at the time of registration. Please do not deliver lunches during the clinic, as lunch times vary!**

Participants will be taught by the Sky Dancers. If you have any questions, please email Rebecca.Rose@kellerisd.net or call at 817-744-2407. Feel free to visit our website www.timbercreekskydancers.shutterfly.com.

Please return this portion of Registration to Rebecca Rose/Timber Creek HS with payment (checks payable to SDSO)

Name

Address

Parent Name

EMERGENCY Phone number

Grade

Circle T-Shirt Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult XL

I hereby give my permission for my child to participate in the Sky Dancers Dance Clinic. I hereby waive and release Ms. Rose, Mrs. Harris, the Sky Dancers, the SDSO, and the Keller ISD from any and all liability for injury or illness incurred while at the clinic. I give the staff permission to act for me, according to their best judgment in any emergency.

Parent/Guardian Signature

Date